Adolescents and smartphones in art-therapy laboratory
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Abstract
This article deals with a group psychotherapy with adolescents in the particular context of an art-therapy laboratory. It aims to describe new possible settings with adolescents and demonstrate how new elements like smartphones can be used as a creative means in a therapeutic relation, just like it is possible to use drawing or clay-modelling as proto-symbols in a transforming communication.

Keywords: adolescence, group therapy, art-therapy, smartphone, creativity

When working with adolescents, you quickly realize that everything relevant to them, starting from their mental functioning, needs re-signifying.

Alex (13 ½ years old), in session, elaborates the following story that I faithfully transcribe:

“Once upon a time there was a boy who wanted to get into a secret house on a rainbow, which had not been inhabited for years. One day he decides to get into the house with a friend of his, but at first sight they can’t spot any way in. Finally, they see a trapdoor and get in. It is a nice house, no dust, it seems normal. They decide to transform the house into their secret shelter. The very first night they sleep in the house they hear noises coming from the basement. They check, but nobody is there. The noise disappears, but when they go back upstairs everything is upside down, broken, and blood spots are on the floor. They are scared to death and want to run away. But the trapdoor has disappeared! There’s no escape. They try to use their cell phone to call the police but there’s no signal; they look for weapons but they can’t find any. In a panic, they start screaming. Once the noise is over, a zombie comes into the house carrying a chainsaw and beheads his friend all of a sudden. In despair, he starts running and finally finds a rope leading onto a tree. But while he is running he gets caught in a rope and hangs himself. Death decides to give him a second chance and brings him back to life. He goes back into the house, his friend is still alive but dazed. He meets the zombie and tells him Death has given him a second chance. They become friends. They tidy up and write a warning sign: LIFE-THREATENING. DO NOT ENTER. As they get home, they find their parents in despair. They can’t tell them the truth and make up an excuse for their long absence. Meanwhile, the boys have become adults and their parents old. They’re old enough to go and live on their own, but they end up living in the secret shelter. They want to prevent others from dying for the curiosity to get into house. They never get old and live in the house as guardians ever after”.
The title of the story is *The boys who vanished into thin air*. The story was inspired by a drawing made with crayons, created during a session, portraying a house on a hill, a rainbow and two boys riding their bikes.

Several interesting elements may be found in this story, but I remember noting it down right after the working session (which dates back to 5 years ago), though I was not used to doing so. It was the first imaginary story where one of my young patients had introduced a cell phone, and the concept of “having signal”, being connected with the rest of the world, was starting to get a different connotation. The phone was not being “used” during the session, but it was actually a means to describe an interior state.

By that time, Alex had stopped going to school for several weeks (he was in year 8), in the mornings he was sick, vomited, and had severe stomachaches. He was tall, good-looking, long hair, modish, baggy pants, looked much older. Always holding his phone or placing it clearly visible in front of us.

I remember so clearly: he can barely speak, and asking him questions is like a form of violence. In such a handsome body, the soul of a child playing with his dogs finds protection from any stimulus causing anxiety.

We are drawing together, standing side by side before a big table. Long silence full of distress. Something changes when Alex spontaneously shows me a picture of his dogs from his cell phone. A wide stretch seems to open in front of us where something may take shape.

He looks surprisingly different and relaxed compared to what he looked before, completely isolated. I smile inside, what a strange situation. The cell phone has become the means of communicability between us! We start talking about his four dogs: how they eat and play; the relation between each other and between them and the people they are familiar or unfamiliar with; how they have poppies and raise them...I finally feel we are allied.

It gets easier to work with colours, shapes, images, possible words and sceneries. The works created with chalks, tempera, watercolours and clay are able to display a number of mental images and movements not even remotely possible when we describe images of reality and talk about daily matters.

We make free association of words. At first, it is a sort of game, a competition between us; then it is a solo, the words collide with the previously deafening silence filled with anxiety. Words come out rather reluctantly at the beginning, then he starts having fun and we begin to associate stories to iconic perceptions. Obviously, at this stage, words and drawings are still a shapeless emerging experience tending from the body toward speakability, but still far from the representation of the self.

The reason why I’m reporting this experience is that, more than in any other cases, the cell phone and the net were the bases to weave a structure and mend internal bridges with strong and distressing images impossible to come out from a state of
paralysis of the mind. Alex tells his stories using his internal images (referring words of things stored in memory) mixed with emotions. However, before using the support of the “external memory”, he seemed unable to grasp anything. My personal tendency to reconsider theoretical concepts in the light of their clinical application, and my seventeen-year experience with young children and adolescents, bring me to admit that I do not believe, as a general rule, in the specialized training of psychotherapists aimed at specific groups differentiated by age (children, adolescents or adults) or diagnosis (eating, psychotic, sexual disorders).

This article aims to discuss the effectiveness of analytic instruments when they are applied in the life of an individual in a period where the psychic system has different needs from what the psycho-analytic tradition considers to be crucial, such as repression overcoming, transfert, regressions and free associations.

To describe my work environment, I prefer the definition “psychoanalytic psychotherapy”, and refer to the hypothesis of the “Concrete Original Object” (Ferrari, 1992) as a transversal instrument to read the analytic relation. The analytic contact, if it takes place, turns the adolescent into an interlocutor, a subject about to be analyzed, with unique characteristics. A pattern is a necessary condition for researchers to understand each other’s work and to reflect on their personal experience. To this end, I am giving a brief illustration of my work setting, before describing my experience with adolescents and their inseparable smartphones.

**Why create an art-therapy laboratory**

The small number of texts about art-therapy with adolescents is not indicative of its marginal practice. Art-therapy is a victim of its own success: it has turned into a sort of container full of keys that can open ever-transforming polysemous locks, causing misunderstandings in a reality where everybody has a different perspective and claims it to be the only truth.

We need a synoptic thin-out to have a common lexicon. Being a complex thing, rather than saying what art-therapy is, it will be useful to say what it is not (Croce preferred to explain what art was by defining what art was not). If we analyze the word ART, first of all we have to underline that “Art-therapy” is not Art, not necessarily, not always, hardly ever.

Art involves the presence of an audience and the reintegration of the work of art in the socio-cultural reality. Well, this is not the aim of art-therapy, which actually fits in the category of therapy.

Art requires the knowledge of techniques, methods and processes to pursue a goal, an ideal of beauty over time and cultures. Adolescents in art-therapy deal with sketches, ephemeral, artistic inexperience. They are not asked to be artists. The work of art is created in solitude; the art-therapy production derives from the relation with a third party (the therapist) and/or with a
group of co-authors. The transferral dynamics relegate the aesthetic factor to the last position, contrary to true art. To sum up, art-therapy is not art… yet.

It is neither about teaching art, though some form of technical advice is necessary to communicate. Nor about psychopathological art. Dubuffet was ironically said that art cannot be categorized according to pathologies.

Using a system of inferences to attribute a particular meaning to art means interpreting art. Only an experienced specialist, analyzing colours, themes, styles and behaviours, will be able to trace the pathological component.

It is not ergotherapy. In spite of the connections existing between the two, ergotherapy and art-therapy are rather different. In ergotherapy the material result, ability, aesthetic appearance, as well as immediate pleasure determine the creation in a socio-therapeutic perspective. Whereas in art-therapy, the creation is a free projection that excludes (or not necessarily pursues) aesthetic research, result, and profit expectation. Where the two practices coexist in the same institution, ergotherapeutic acquisitions represent an extension of art-therapy skills. The body is the denominator. And although a number of experts affirm that psychomotoricity is fundamental in every art-therapeutic activity, this cannot be assimilated to psychomotor rehabilitation.

Painting, sculpting, and drawing are perceptive and motor activities involving body movement, but the passage from the directive gesture of ergotherapy to the creative expression of art-therapy takes place in the presence of a therapist ready to receive the shaping of future thoughts.

By involving motor and cognitive-affective memory, the plastic-painting activity reestablishes a sort of osmosis between adolescents and their “being body”, still unexplored.

Unfortunately, art-therapy is quite often used as a mere technique of motor function rehabilitation. It is important to make this point clear as art-therapy is not even exactly a body therapy, though the body is the denominator of all the other disciplines included in art-therapy (dance, music, theatre).

Obviously enough, art-therapy is not a verbal therapy, in spite of the primary role that words have in every kind of therapy.

The plastic production is at same time more direct and less direct than the verbal therapy: defense of the self is preserved and the product conveys a narcissism repairing the therapeutic work “in the depth” and “of the depth”.

Art-therapy includes those pioneering therapies such as Anna Freud’s Art Technique, M. Klein Game Technique, and D. Winnicott’s Squiggle Game. They are all about the possibility to switch from playing to drawing, through the help of the therapist.

Back to our main point, therefore, we can see that art-therapy is more or less everything it is not.

An epiphenomenon of civilization, isn’t it?

Both art and somato-therapy claim to be part of art-therapy, whereby art-therapy can be considered as the meeting point between the two and the term can also be used in the plural, depending on the user’s view. Art-therapy has aroused such a babel of meanings that most researchers have chosen to adopt different denominations.
Some use the definition psychotherapy with plastic expression, some others therapies with art, others therapies through art, and so on. Among all conceptual inflations, the latest ones seem to be “expressive art-therapy” and “creative art-therapy”. Expressive art-therapy is based on a mediated expression (poetry, painting, sculpting...), where you analyze the work in a transferral context. In creative art-therapy the expressive dimension is as well stimulated, but the treatment is totally different. It is not about deciphering the visible work. Rather, it is discreetly accompanying the subject into his/her works, without touching possible inalienable taboos, symptoms, defenses or resistances. The adolescent should be placed in the position of an actor; we have to accompany them through their elaboration and passage to action, moderating the expression of his/her symptoms. Art-therapy works thanks to a psychic process where the unknown and the creation are the keys to any kind of change, through inter-subjective insights where there is no room for axioms or equations. As for indications, there is a wide range of possibilities. This is what I consider the real strength (but also the weakness) of art-therapy. Personally, I propose art-therapy for all those who are not keen on using verbal language and /or those who have had unsuccessful experience with other therapies, and those who are familiar with artistic expression. Targeted users are children and adolescents. The results mostly depend on the therapist specialization. Most authors claim contraindications in cases of mental anorexia, individuals particularly keen on acting, iconoclasts and group relation saboteurs. I do not believe in contraindications for specific categories. In my view, what really determines contraindications is the ability to analyze the therapist-patient relation and decide whether it is going to work successfully or not, as it should be the case before starting any kind of therapy. A therapist willing to work on “ways and forms”, rather than contents, may rely on drawings, sculptures, poems, or make use of the “words brush” to establish infra-verbal communication with the patient. As a psychotherapist and an art-therapist using different forms of communication with patients, I focus on the effectiveness and function of both verbal and iconic language, as means to express and communicate thoughts and as tools for analytic transformative relation. The French psychoanalyst André Green (2002a), deeply interested in translating into linguistic terms the functioning (and nature) of a psychic system which per se is not based on linguistic elements (“unspeaking unconscious”), describes a complex process where the meaning (a third element) is retrospectively established only when mnestic traces meet body demands. In art-therapy we have the production of a visible, sensory object, inscribed in a processual dynamics. We find mnestic traces which are not often psychically processed, caught and recognized in experiences where the body is not involved. This contact between being and doing takes place overcoming the rule of abstinence in force in verbal therapies. It goes without saying how useful this may be for adolescents, notoriously action standard bearers.
Painting, sculpting and drawing are the concretization of motor and perceptive actions involving a body activity recognized by the other. Just observing an adolescent painting we can catch his “body dance” as a primordial component of expressive play.

Green (2002b) identifies the category of “tertiary processes” where primary and secondary processes come into a relation, so that primary processes limit the saturation of secondary processes and vice versa. In other words, a potential space where there is no question about the reality or non-reality of what is at stake, and the field of illusion, of the “as if” becomes the specific analytic space of transfert.

Symbolization, as the linking element between primary and secondary process, is getting more and more unsuccessful with children and adolescents of the latest generations, which remain hooked to old communication modes and bound to concreteness of thought.

Alex and his story are a clear example of this. According to Bion’s postulates (1967), thinking originates from the lack of an original object, whereby the use of objects from the external world is made possible through the use of symbols as equivalent, thus saving the concrete object, original source of experience.

According to the hypothesis of the Concrete Original Object (Ferrari, 1992), the body is the object to be taken into consideration. Thinking originates from the body, grows and develops due to through emotional experience. As a consequence, it is the presence (not the absence) of sensation to foster the capacity of thinking, which is no longer possible when sensations and emotions saturate the mind.

Several experiences with adolescents have led me to conclude that language-based intervention strategies may be ineffective, unless there is a change starting from the body and gradually getting to the symbol par excellence: the word.

The conscious and integrated body experiences, including the plastic-painting experiences derived from art-therapy, can be considered as proto-symbols, an intermediate state between the sensation still not perceived and the symbolization through conscious thinking, which can be verbalized, recognized and responsibly assumed by the subject.

Drawings, works and objects created in art-therapy represent a first shaping of the experience which can be observed and assimilated through a process of appropriation that makes the emotion acceptable and expressible.

The theoretical hypothesis leading my clinical work is the Concrete Original Object (Ferrari, 1992). Everybody needs to shape and express the events and vicissitudes concerning the difficult relation between their corporeality (Onefold, according to Ferrari) and their own psychicity (Twofold, the fundamental function between corporeality and the culture we live in).

In this perspective, body and mind come constantly into play in a bi-directional process: top-down, starting from the cortex and involving thinking to modulate and regulate lower levels; bottom-up, starting from physical sensations to reach emotions (Nanetti, 2015) and become expressible.

In adolescents (and in ourselves), physicality is sometimes felt as something disquieting, an unreachable core, never fully expressible.
Yet, we know that this core continually releases sensations able to reach perception and generate emotions, thus creating the complex group of functions called corporeality. It is from corporeality that psychicity emerges as a complex group of functions designed to protect its functioning by attenuating sensory intensity (Romano 2013).

The work is therefore carried out either through the body, altering its standard performance (e.g. changing posture, raising the volume of voice or using sensory organs in a different way), or by experimenting the unusual, at a verbal level, through dialogues and metaphors conferring new meaning to life experience.

**Adolescents and their body expression as a proto-symbol**

Stimulating adolescents’ creative potential through the therapeutic use of expressive means is often thought of as something subversive, just like the subversive tendency of maturing adolescents.

Anzieu offers a precious contribution to understand the creative process dynamics, a transient and ephemeral aspect of adolescents’ creativity (Chabert, 2000).

Our daily clinical experience tells us that verbal language is by no means a channel of choice, whereas non-verbal language can be perfectly inscribed in the dynamism of adolescence.

Youth conversations are mostly made up of emoticons, photos and cartoons taken from the Internet and social networks. Since the 1980s several studies on communication have dwelt on graffiti, tattoos and rap as the peculiar expressive forms of adolescence, but today digital natives are choosing new expressive forms such as photos, videos, Mii, Avatar (2), profiles etc. Creative expression needs only the right context to emerge, and adolescents always find new distinctive forms.

Gaetano Benedetti, in his therapeutic technique of the progressive specular drawing with psychotic patients, use the term proto-symbol to indicate delirium, hallucination that cannot be a symbol yet, but can be a seed of the symbol in the therapeutic transformation work.

*If we manage to modify the proto-symbol in the verbal discourse with the patient, to obtain a new image which is expanded compared to the pathological image, we have certainly made a therapeutic proposal. (A.S.P., 2006).*

Proposing art-therapy to adolescents in difficulty is a way to tune in their bio-psycho-socio-cultural dynamics and make their corporeality create images to use as proto-symbols.

As for the selection of the right tools, the therapist should be able to analyze the relation in progress and decide whether it is properly functioning and which channels are actively addressing the patient’s distress.

In adolescence, more than in other stages of life, the subject needs to leave traces in mediating objects and mediated situations which act as formal containers and metabolizers.

According to Vacheret (2008) describing the technique of Photolangage, images are mediations between the conscious and unconscious: *images are mediations between*
external reality and psychic reality, allowing connections in the intra-psychic reality of the subject as they are the objects of inter-subjective exchanges. (Vacheret, 2004).

For most adolescents, external objects (colours, brushes...) represent an excellent tool to “think thoughts”, whereas for others this mediating role is played by their body and/or the therapist (Grignoli, 2008).

As a matter of fact, when working with adolescents, it is essential to identify the most suitable mediation: mediation with plastic materials (art-therapy), body mediation (body therapy), verbal mediation (verbal therapy).

It is important to play the “music” with different instruments, as the therapy should involve different mediations.

The French psycho-analyst Soudres (1998) warns about the risk of negligence in the work with adolescents. The therapist may find it difficult to understand the psychic construction of the subject where body, iconic and language phenomena are concentrated, or may lack the flexibility needed to switch from one mediation to the other.

Therapy mediated through art allows permanent transgression as it allows the unthinkable to occur. Adolescents are habitués of the transgressive and unthinkable, which become thinkable and expressible thanks to what Pierre Fedida (1976) calls “objeu”, something between words and objects.

Playing with colours and materials turns the invisible into visible and the absent into present.

As for the therapeutic side of the experience, we can observe the following:
- with adolescents it not advisable to dive into the past, unless it is something affecting the present;
- most explorations are carried out autonomously during the adaptation required by creative expression;
- there is a continuous fluctuation between a disjunctive position (separate facts) and a conjunctive position (link facts);
- changes occur from both a psychic and a behavioural point of view;
- the adolescent does not necessarily have to understand the process as long as there is an improvement in the quality of life.

Artelieu and the group of adolescents with smartphones

 Needless to say, adolescents are great space-consumers. They are regular clients of bars, pubs, discos, and recreation rooms. They often create their own spaces.

It is not difficult for me to involve adolescents in the therapeutic context that we have called Artelieu (“place of art” in a sort of Italian-French pun) (3).

The workshop environment, the discreet half-light and informal setting (wall unit for standing painting, worktables, exposed tools and shelves with artistic materials of different kinds) represent a sort of “suspension” where adolescents can reintroduce, at their own pace, a temporal dimension which makes the relation more tolerable and captivating.

The group experience takes place on a weekly basis for 1 ½ hours and lasts for a preset number of months. The group I report about was made up of 6 adolescents aged
12 to 14, 3 girls and 3 boys, all with problems of anxiety, somatization disorders and difficult relations with peers. It is only a brief but significant episode, not covering the whole story of the group but useful to illustrate a creative use of communicative mediators in therapy.

Two of the girls have their cell phones always with them, which arouses my curiosity from the very beginning as it had never happened in the previous groups. They don’t leave their phones in their coat or their bag, as the others do, even though the phones tend to become invisible, almost a built-in element. Even when working with the most demanding and engaging materials (clay, shaving foam, sand, etc.) the two girls can’t help looking for their phones.

Unlike other cases, I immediately realize that being strict about the use of cell phones is not the best way to proceed. The phone is not used during the session, but simply held in their hand from time to time, as an automatism.

For us adults, the cell phone is a means of exchange and communication, whereas for adolescents it is much more than that: it is a sort of social gym, a place where they can build their identity. As a matter of fact, during adolescence everything changes very quickly: the body, emotions and interests. To the point that identity, forced to continually adapt to turmoil, becomes particularly fragile.

The personal documents adolescents store in their phones guarantees the stability they cannot find in their subjectivity. The cell phone suddenly becomes the privileged tool that allows adolescents to reach not only another space (other than the family), but also another time, the time of an interconnected world. In this world, the relation intensity and authenticity are not determined by physical proximity but by the power of shared centers of interest.

Furthermore, excessive use of the phone is often a way to exorcise the fear of solitude and emptiness, unbearable in this stage of life, and the stronger the sense of exclusion the more important the awareness of being interconnected. Depriving adolescents of their phone is like tearing off a part of them, preventing interconnection with their friends and social exchanges, being subjugated by the direct influence of the surrounding adults.

It has become quite common, when talking about adolescents and their phones, to assimilate the phone to a teddy bear. A misleading comparison, in my opinion, offending their intelligence and desire of emancipation, which takes different shapes from generation to generation.

Adolescents are not glued to their phone more than adults are when they use it at meetings or restaurants. Moreover, the word “teddy bear” or transitional object, conceals an essential point: the phone is not supposed to replace the mother in a regression towards infant relations.

On the contrary, it is an excellent tool to get information and a means of expression to escape from the institutional representatives, starting with parents. In other words, in most cases the phone is not a reassuring teddy bear, but it represents the right tool to separate from parents more quickly.

The smartphone backs both the exchange of information and ideas in real time and the expression of identity.
Therefore, I decide to introduce the cell phone as a new instrument in the art-therapy group.

Nothing has been prepared, neither papers nor colours, and I ask them to take their phones (I am sure everybody has one) to work on their ability to look around and take pictures.

After all, we use smartphones to create images, film the reality from our own point of view. Right then, let’s see how adolescents “see” the world: the world seen outside basically reflects the world we have inside.

I give them precise tasks to carry out: after looking around, take a photo of 1) a detail never noticed before; 2) an object from an unusual angle; 3) an object covered with a veil to take its “barely visible” effect; 3) a backlit object, using a lamp, the sunlight or candlelight; 4) a part of their body by which nobody would be able to recognize them; a scenery artificially built by them.

They can take various snapshots but in the end they will have to choose one per task to be printed on photographic paper (a designated position has been purposely set up).

The guys are surprised and excited. They use their phones with competence and confidence. They love acting as skilled photographers. The difficult part is to choose among lots of snapshots. They have a hard time giving up the abundance provided by technology and the sense of omnipotence deceptively offered by the virtually endless space.

Adolescents are used to loading the phone RAM memory without selecting the elements which they may decide to use in the future, in a process of continuous repression of apparently stored experiences. The smartphone is becoming a memory prosthesis for the new generations. This is the reason why I ask them to carefully select the snapshots, print them out and look at them on paper. Then they can transform them further, using their hands (they won’t be holding their phones this time), tools which resume their original function.

The choice is the most difficult part of the session: at this age adolescents have not developed personal selection criteria as they still haven’t built self-awareness. Yet, they are fully caught in the unusual experience of holding their own works, the snapshots they have printed. And here is the best part of it. After the illusion of the perfection and the definition of a moment that they “caught” and indelibly fixed, I ask them to cut all the images to create a new different image containing the old images but in an original and unrecognizable way. A sort of image transposition, the construction of a visible, concrete metaphor, gradually passing from the simple activity of taking a photograph to a more complex subjective creative process.

Bewilderment, panic and resistance are the initial reactions, which then leave ground to the will experience a new challenge in a really complex work. After feeling the pleasure of other artistic proposals, the new task arouses their curiosity. Strong and important experiences emerge: the anxiety for having to define themselves without any pre-set reference points; the fear of not being able, of not being appreciated, of being disappointed, fragmented in a distressing disorder, incomprehensible to others.
Having the possibility to do all this in a space of shared “play” where the therapist welcomes and guides adolescents, creates links between objects and thoughts, and facilitates the relations between them, so that they do not feel alone in the difficult research for a new identity, making their task much easier.

The peculiarity of this kind of intervention is due to the possibility to try new actions on the threshold of the “as if”, the game, a virtual space of action which refers to their craze for videogames and virtual realities but sets the body and its experiences in complex situations where the therapist and the other members of the group are co-protagonists. (5).

This brief testimony aims to open the debate about communicative mediators in therapy, a challenging issue when working with adolescents. Any proposal aiming to activate psychic functions in this clinical field always follows a circular path from senses to the symbol, and from the symbol to senses. In this case, from the “virtual” to senses, from senses to art, and from art to words.

Notes
(1) The Original Concrete Object hypothesis (“L’eclissi del corpo”, Ferrari, 1992) offers the psychoanalysis a new concept regarding the object characteristics: the existence of an Original Concrete Object, the body, intended as the phenomenal reality of the mind (object), but subject as well as it represents the basis of being. The psychic system, therefore, exists as a refined differentiation from the human body biological development. For in-depth analysis of this hypothesis, refer to another article in this issue of the journal (cfr. Romano F.).

(2) Mii and Avatar are virtual characters created for web role-playing games, where children and adolescents represent themselves, their friends and relatives with virtual physical characteristics, age and gender. They can create as many as they like and use them to invent stories, alternative lives in virtual worlds, allies or enemies in games.

(3) The exact denomination is Artelieu (Associazione Italiana Studi sulle Psicopatologie dell’espressione e Arteterapia), with headoffice in Pescara, fonde by the author and other colleagues in 2003.

(4) The term “virtual” is to be intended as potential, possible.

(5) Reference to the “group psychic apparatus” René Kaes (2007), just listed in the bibliography and not analyzed in this article to leave room for the clinical experience connected with new technologies.

References


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